



The Eble Park Ice Arena In-House is designed for players that have completed a hockey development program. The emphasis in this program will be on skill development. Each session will be divided into two halves. The first half of each session we will be working on player's skating as well as practicing hockey drills. The second half of the session will be for games. All sessions will be at Eble Park Ice Arena on Fridays from 5:45pm – 7:15pm. (See Schedule)

Players required to have full hockey equipment and white jersey (No rental equipment available)

**For program consistency, prepay only (No week to week buy-ons)**

**This Program is not available for skaters that play in a youth hockey association**

Skaters Name (print clearly) \_\_\_\_\_ Age \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parents Name (print clearly) \_\_\_\_\_ Emergency phone # \_\_\_\_\_

Home Phone # \_\_\_\_\_ Email (print clearly) \_\_\_\_\_

#### IN-HOUSE LEVELS

Please Check:

☐ \$250.00 MITE Level (ages 5 – 8)

☐ \$250.00 PEEWEE Level (ages 9 - 14)

\$ \_\_\_\_\_ Paid – Cash ☐ Check ☐ Credit ☐

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#### Waukesha County Park Release of Liability

*My child is being allowed to participate in the Eble Park Ice Arena In-House Program at Eble Park Ice Arena. I understand that there are certain dangers inherent in playing ice hockey, which includes but is not limited to injuries from contact with other player's, sideboards, goal standards, the ice, the puck, and equipment. In consideration of being allowed to participate in the In-House program, I, Individually and for all others who may claim based on injury to my child, accept the risk of physical injury, release and discharge Waukesha County and its employees from any liabilities to me or my child for any physical injury which may occur while my child is participating in the In-House program. I understand that the purpose and intent of this release is to prevent me, and others who may claim through me, from recovering any money from Waukesha County and its employees for any physical injury my child may suffer while participating in the In-House program at Eble Park Ice Arena.*

Signature \_\_\_\_\_ Date \_\_\_\_\_